

09/740487

# CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	
INDEPENDENT CLAIMS	minus 3=	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	150.00	BASIC FEE	300.00
X3 25=		X350=	
X100=		X200=	
+180=		+360=	
TOTAL		TOTAL	

## CLAIMS AS AMENDED - PART II

5/24/06

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	25	minus 33	
Independent	10	minus 10	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X3 25=		X350=	
X100=		X200=	
+180=		+360=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

1-22-07

AMENDMENT B

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	14	minus 33	
Independent	4	minus 10	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X3 25=		X350=	
X100=		X200=	
+180=		+360=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C

7/17/07

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	184	minus 33	
Independent	4	minus 10	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X3 25=		X350=	
X100=		X200=	
+180=		+360=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

\* If the difference in column 1 is less than zero, enter "0" in column 2.  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."  
 \* If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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